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SERIAL NUMBER 10/663,586	FILING OR 371(c) DATE 09/16/2003 RULE	CLASS 424	GROUP ART UNIT 1618	ATTORNEY DOCKET NO. 8256MC
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APPLICANTS

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** CONTINUING DATA *****

This application is a CON of 09/957,392 09/20/2001 ABN which claims benefit of 60/235,011 09/25/2000

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 12/09/2003

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no		
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance		
Verified and Acknowledged	Examiner's Signature Initials		
STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
OH	0	23	3

ADDRESS

27752

TITLE

MRI image enhancement compositions

FILING FEE RECEIVED 804	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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